

GOVERNMENT OF ANDHRA PRADESH
ABSTRACT

Health Medical & Family Welfare Department – Government Hospitals/
Institutions – Formation and functioning of Health Institutions/Hospitals
Development Societies for effective functioning Revised orders - Issued.

HEALTH, MEDICAL & FAMILY WELFARE (D1) DEPARTMENT

G.O.Ms.No.48

Dated:13-05-2015

Read the following:-

1. G.O.Rt.No.874 HM&FW (D1) Dept., dt:27.12.2006.
2. Lr.No. 102/SPMU/NHM/ 2012-2, from Commissioner of Health & Family Welfare dt:25.03.2015.
3. Lr.No. 1269/D.1/2015 from Commissioner & Ex-Officio Secretary to Govt., AYUSH dt:25.03.2015.
4. Lr.Rc.No.4415/Plg/2015 from DME, A.P., Hyderabad dt:26.03.2015 .

ORDER:-

In the G.O 1st read above certain guidelines were issued in respect of Hospital Development Society in the State. Now the Government of Andhra Pradesh has reviewed and decided to re-issue the instructions / guidelines issued in the G.O.1st read above. In the letters 2nd, 3rd & 4th read above the Commissioner of Health & Family Welfare, Commissioner & Ex-Officio Secretary to Government, AYUSH and Director of Medical Education, A.P., Hyderabad have furnished fresh proposals for revising constitution of Hospital Development Societies of Primary Health Centers/ Community Health Centers, Area Hospitals, District Hospitals, Teaching Hospitals, AYUSH Medical colleges & Dispensaries in the state.

2. In the circumstances explained by the Commissioner of Health & Family Welfare & Ex-Officio Principal Secretary to Government, AYUSH in the letter read above, and in supersession of the orders issued in the Government orders first read above, the Government after careful examination hereby issue the following guidelines for constitution and organization of Hospital/ Primary Health Center development Societies, in all Teaching Hospitals, District Headquarters Hospitals, Area Hospitals, Community Health Centers, Primary Health Centers and other Government Hospitals, AYUSH hospitals in the State. These are:

1.REGISTRATION:-

- I. Hospital / Primary Health Centre Development Societies shall be constituted with members as described in this Government Order and registered under the A.P. Societies Registration Act, 2001.
- II. The said Hospital / Primary Health Centre Development Societies shall be registered under sub section (1) section (3) of A.P. Societies Registration act, 2001 as non profit bodies with the bye-laws as stipulated herein or as may be amended or instructions issued by the Government, from time to time.

(PTO)

2. CONSTITUTION OF THE DEVELOPMENT SOCIETIES:-

- I. The Composition of Chairpersons and members of Hospital / PHC development societies under this order shall be as described in the Annexure to this order.
- II. In respect of ex-officio members [both Government Officers and non-Government Organizations] as and when there is a change in the membership, the new members by designation will automatically become the office bearers/ members of the society.
- III. Any member including non official chairperson who abstains from attending development society meeting continuously for 3 times shall automatically cease to be member / chairperson. The convener society shall report the matter to the Government, who will appoint a substitute.

3.TERM OF THE HOSPITAL / HEALTH INSTITUTIONS DEVELOPMENT SOCIETY MEMBERS:-

The term of the Hospital Development Society Members shall be usually for a period of three years.

4.CONVENING OF MEETING OF DEVELOPMENT SOCIETIES:-

The Hospital Development Societies shall conduct meeting every month. Depending on urgency and convenience of majority of members special meetings can be convened.

- I. A minimum of 7 days notice shall be given for every meeting, by the convener.
- II. The Quorum for the meeting shall be at least one-third of the members.

5. ISSUES OF BUSINESS:-

- I. Review the day-to-day functioning of the institution its cleanliness, the regular attendance of the staff, and delivery of quality healthcare services by the staff to the general public;
- II. Review compliance to Standards and treatment and other protocols issued by the Government/other professional bodies in the treatment and other protocols issued by the Government / other professional bodies in the treatment of patients. Any deviation will be noted and brought to attention of concerned supervisory officers for remedial or disciplinary action.
- III. Review of the OPD and IPD service performance of the hospital in the last three months, difficulties experienced in the process; and initiate suitable measures for resolving these difficulties.
- IV. In respect of Primary Health Center-Hospital Development Societies, review of the outreach work performed during the last three months and outreach work schedule for the next quarter be reviewed.

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- V. Review of efforts in mobilizing resources from the community, trade / industry and local branches of professional associations like Indian Medical Association and Federation of Obstetric and Gynecological Societies of India etc, for undertaking improvements to the concerned institution. Leadership in this regard will be provided by the nominated Chairperson.
- VI. Review of implementation of various health schemes under the State and Central Governments, including NRHM, RCH-II, Disease Control Programmes, Immunization, Family Welfare Programmes, etc., will be undertaken.
- VII. Review the status of utilization of funds, equipment and drugs received under different programmes of the Government. Suggestions on optimal utilization of resources will be discussed at meetings.
- VIII. Review compliance to Citizens' Charter displayed in the Hospital and the effectiveness of the Grievances Redressal Mechanism. Exceptional performance in the institutions should be highlighted and recognition must be provided for such services.
- IX. In addition to the above regular items, the Annual Report of the Society relating to last financial year shall also be taken up for discussion in the meeting falling due after the close of every financial year.
- X. Review areas of hospital and identify areas or services where sponsored or patronage or donations can be considered and perused by HDS committee members in a sustained manner. Donations in cash or kind from individuals, and philanthropic organizations or central sector undertakings or companies etc., shall be another important source of funds from the Hospital Development Society.

6. RESOURCES MOBILIZATION:-

The Development Society may raise resources as follows:

- I. Budgetary grants and scheme-grants received from the State Government, and in the Government of India under NRHM, RCH-II, etc., schemes shall constitute.
- II. Resources generated through lease or Auction of facilities such as Tea stalls, Canteens, Cycles Stands, Retail Medical Shops, Telephone Booths, Scooter / Car stands etc as ordered in the G.O.Ms.No.604, Health, Medical & Family Welfare (M1) Department, Dated.15.12.1998. Preference shall however be given to Physically challenged persons / Individuals below poverty line, by organizing / taking margin money / subsidy or loan from concerned welfare Corporations or Nationalized Banks etc. a transparent and objective process must be followed in this regard without favouring any one.
- III. Fees fixed for use of hospital's miscellaneous infrastructure for various purposes / services including for conferences, training and research facilities etc., to other health sector Institutions / Individuals.
- IV. Charges collected from paying rooms.
- V. They shall follow the guidelines issued in the G.O.Ms.No.152 Health, Medical & Family Welfare (H) Department, dt:08.12.2014 while condemnation of the material equipment and furniture etc.
- VI. Any other source as may be identified by the Development Society.

7.LAND & BUILDINGS:-

No Hospital / No institution will have any authority to sell / dispose / mortgage / Leave-out / rent-out or alliance in any manner any part of the hospital / buildings, or land belonging to the hospital, under any circumstances without specific prior written orders of the Government or appropriate authority.

8.EMPLOYMENT OF STAFF:-

No Hospital Development Society shall hire any staff in any category on behalf of the Hospital Development Society without the prior written orders of the Head of the Department at the State level supervising that medical institution.

9.PATIENT RECORD CARD:-

- I. A full fledged "Patient-Record Card" shall be provided to all patients as OP Medical Card which will be valid upto 3 months, without need to pay any registration fee. Here Aadhar unique identify card number will be incorporated without fail.
- II. All Below Poverty Line (BPL) families shall be provided with "Patient-Record-Cards" without any fees.

10. PROCEDURE FOR COLLECTION:-

- I. The Hospital / Institution will maintain a joint savings bank account in a nationalized bank in the name of the "Hospital Development Society" for the Institution and it will be jointly operated by the Medical Superintendent and Lay Secretary in Teaching Hospital; In District Hospital, Area Hospital, Community Health Centers, other Government hospital, and Primary Health Centers, the concerned holding charge of the institution will operate this account.
- II. All drawals of funds including such delegation as specified by the development societies shall be duly authorized / ratified as case may be, by the development society in its meeting, and recorded in the Minutes.
- III. Stoppages and miscellaneous revenues, such as rents from commercial complexes lease amount on cycle stands, scooter car stands, lease amount on canteen shed, license fees etc., and damaged. Items equipment articles, consumables, furniture etc generated by the Hospital / Institution shall be deposited in the Bank account of the Hospital development Society.
- IV. Revenues on account of stoppages miscellaneous, other revenues are required to be collected by cash or demand draft and for each transaction, a printed pre-numbered receipt containing Serial Number and Book Number duly printed shall be issued. The duplicate copy should be made and maintained with a carbon sheet. Each receipt must be accounted for in the cashbook on daily basis. Collections by cash shall be avoided except where small amounts are involved. Development Society may specify such items. Monthly income and expenditure accounts must be maintained for all HoDs amounts.
- V. All the collections shall be remitted in the bank account latest by the next working day failing which the concerned will be liable for action for temporary misappropriation and will be dealt with accordingly.

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- VI. The Officers / staff responsible for collection of stoppages and other revenues shall make good, losses incurred by the institution-concerned in case of failure on their part to collect amounts. Collections shall not be used for any purpose, without depositing in bank, i.e., there shall be no direct appropriation of the receipts.

11. FINANCIAL POWERS AND UTILISATION OF FUNDS:-

- a) All proposals for expenditure by the society shall be discussed and approved in the Society's monthly meeting.
- b) The Hospital / Institution Development Society is empowered to utilize the funds which include accruals, collections, donations etc for following purposes:
 - (i) Approve the proposals for minor Civil works and repairs, purchase of medical equipment, repairs and maintenance of equipment, purchase of minor equipment including cots, mattresses, linen, etc., upto Rs.10.00 lakhs duly following prescribed procedure by entrusting to APMSIDC.
 - (ii) Undertake such works that promote cleanliness of premises, beautification, including provisioning of playpen for children recuperating in the pediatric ward, greenery with path ways for recuperating patients in geriatric wards etc., and horticulture through annual maintenance contracts, by even mobilizing sponsorship.
 - (iii) Under take such measures as computerization etc., like Hospital Management Services (HMS) as will improve the efficiency and facilitate better accountability of staff in the provisioning of health care services or facilities and ultimately provide for improved clientele / stakeholder satisfaction.
 - (iv) Under take such measures to ensure maximum, efficient and proper use of infrastructure, equipments, drugs and other resources / amenities. An item of review on this can be included in the meeting agenda.
 - (v) Under take such measures as will contribute to a congenial, comfortable, infection free, secure work situation with requisite facilities as library etc for all staff, students and trainees in the hospital and attached teaching Institutions.
 - (vi) Charges collected by the Blood Banks or Blood Storage centers (where they are managed by the Hospital directly, and not by NGOs such as IRCS, etc) shall be utilized for consumables and maintenance and proper upkeep of the Blood Banks.
 - (vii) The funds so generated may be utilized for strengthening the infrastructure and outreach (camps) etc in the other institutions in the primary, secondary or tertiary sectors which are located in the same district in and the medical colleges concerned.

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- c) The following procedure however shall be ensured while exercising the above mentioned financial powers:
- (i) The preparation of estimates and entrustment of works of procurement as case shall be resorted to as per the Government, prescribed procedures.
 - (ii) In case of emergency, i.e., break down of essential services the Superintendent / In-charge Medical Officer may get the restoration of services done through Andhra Pradesh Medical Services and Infrastructure Development Corporation (APMSIDC) or through tender process directly; and the Superintendent / In-charge Medical Officer shall obtain ratification of development society in the next meeting.
 - (iii) The development Societies shall ensure that there is absolute transparency in mobilization of resources, in contracting / entrusting works and ensure proper judicious use of resources so generated in the best interest of improved health care/ facilities and development of infrastructure in the institution. Any negligence or improper decisions / actions in this regard shall be viewed seriously and warrant stringent action against all concerned.
 - (iv) The Superintendent of the hospital / Principal of Medical College shall however have the authority to utilize the "imprest amounts" for purposes specified following prescribed procedure, without prior permission of Hospital Development Society; but subject to ratification by the Hospital Development Society.
 - (v) Statement of audited accounts giving income and expenditure including imprest amount shall be placed for approval of Development Society once in a year.

12.OTHER POWERS:-

- I. The development Societies may conduct periodical skill-improvement sessions for doctors, nurses and other staff in the Hospital/Primary Health Center; by inviting eminent speakers to motivate. Specialist doctors for that purpose, they may also engage Specialist doctors, paramedical staff, anesthetists, grief counselor etc., on hourly / daily basis on contract / honorarium on reasonable terms for conduct of special camps, surgeries etc. The specialist doctors may be motivated to render honorary service failing which only they may be paid reasonable honorarium. The services of such persons who have an established reputation and experience shall be engaged with due care and in a consultative manner duly consulting the Heads of department concerned and other professionals / experts etc. Grief counselors could motive the terminally ill patients and their families, to pledge corneas, and other organs suitable for transplantations.
- II. The Primary Health Center Development Society shall review within its respective jurisdiction, the village specific Primary Health Center action Plan, and the implementation of national health programmes such as NMEP, RNTCP, NPCB, NLEP, NRHM, family welfare Programmes, Programmes for maternal and child health activities etc to ensure that the health institutions concerned take all possible measures for effective implementation of those programmes / action plans. Required community awareness and participation will be crucial concern of HDS in this connection.

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- III. The Development Societies shall ensure correct and proper recording of case sheets/data/facts and also review the performance indicators and take such measures as analysis of data etc as are necessary to rectify deficiencies and promote improved delivery of services or health status of the people concerned.
- IV. Larger issues requiring Government Orders / Instructions by other departments etc., for example assured protected water supply, measures to prevent contamination of drinking water sources, other problems arising due to factors beyond their control, etc., must be referred to Heads of Department and Government.
- V. Hospital / Institutions Development Society is also empowered to select contractor for supply of good diet in the institution by calling for tenders or as prescribed by the government Development Society / concerned staff should monitor and ensure the supply of good quality diet to patients as per norms and procedure prescribed by the Government from time to time.

13. MAINTENANCE OF ACCOUNTS AND CONDUCTING ANNUAL AUDIT:-

- I. The Society shall maintain proper books of accounts, which shall be audited by Chartered Accountant, or a firm of Chartered Accountants to be appointed with by the Society once in a year.
- II. The audited accounts of the Society for every shall be placed before the Society for approval and a copy of the accounts with auditor's report shall be furnished to the concerned Head of Department in the HM&FW Dept. some reasonable fee can be paid to audit firm in this regard if found necessary.

14. RESPONSIBILITIES:-

- I. The Superintendent and Heads of Department and each of staff shall be individually responsible for the discharge of duties as per the specific job chart as assigned to them and such duties as may be entrusted by the Hospital Development Societies or Heads of Institution or Head of the Department or the Government from time to time. Clarity in this regard will be given by Superintendent from time to time to HDS.
- II. The entire staff shall work with a team spirit, maintain effective co-ordination and build a reputation for the institution in providing a caring and quality health care services to the people or in maintaining highest standards and quality of medical education as case may be. Each patient / student / trainee should leave the institution with the highest possible patient satisfaction.
- III. Head of institution along with Head of Department may constitute sub committees for overseeing various issues like sanitation, drugs supplies etc.

15. OTHER IMPORTANT MATTERS:-

- I. No member of the Hospital / Institution development society shall attempt to bring any undue influence on member – convener or other members to extend undue benefit to any individual or party in the entrustment / award of works / contracts etc. In all financial, contractual or activity having recurring cost implications there must be proof of transparency and no conflict of interest.

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- II. All decisions shall be taken on merit and in a transparent manner in the interest of providing best possible services and facilities to the patients / staff / trainees as case may be. In case of failure to provide services or to adhere to conditions of contract or quality specifications, the member – convener / head of the department / staff concerned shall record and communicate shortcomings to development society for suitable action including recovery of costs or cancellation of contract or such action as required. The recommendation of the member – convener in all such cases shall be followed by the development societies. Dispute or disagreements if any, shall be communicated to District Collector at District Level for appropriate decisions, who shall dispose the matters on merit or refer to the head of department / Government depending on necessity.
- III. The development Society shall oversee and ensure regular attendance and proper discharge of duties by all staff.

16. REPORTS TO GOVERNMENT:-

The Hospital / Primary Health Center Development Societies shall send (1) copies of minutes of every meeting; (2) Abstract of progress reports as prescribed; (3) Annual audit Reports and (4) any other reports as prescribed to the concerned Head of Department through the District Controlling Officer (where applicable) on any matter concerning the functioning of the hospital for suitable action by the Government within one month of the last date of the Quarter.

2. The Commissioner of Health and Family Welfare, A.P., Hyderabad & Mission Director, National Rural Health Mission (NRHM) shall monitor the constitution and organization of the Hospital / Primary Health Center Development Societies for the purpose of ensuring that they fulfill the NRHM norms and become eligible to receive grants under the National Rural Health Mission (NRHM).

3. Annexures are appended to this order.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

**POONAM MALAKONDAIAH
PRINCIPAL SECRETARY TO GOVERNMENT**

To,

The Commissioner of Health and Family Welfare, A.P., Hyderabad.
All the HoDs under the control of HM&FW Dept and all the concerned
through Commissioner of Health and Family Welfare, A.P., Hyderabad
All the District Collectors in the state.
All Hospitals / Institutions under the control of HM&FW Dept.
through concerned HODs.
The Principal Secretary to Government, Panchayat Raj & RWS.
The Principal Secretary to Government, Municipal Admn. & Urban
Dev. Dept.
The Commissioner, Panchayat Raj Department, Hyderabad with a
request to communicate all the local bodies under their control.
The Commissioner & Director, Municipal Administration Dept., A.P.,
Hyderabad with a request to communicate to all the local bodies
under their control.
All the District Medical & Health Officers in the State.

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Copy to:-

Joint Secretary to Chief Minister
P.S. to Minister (Finance)
P.S. to Minister (Panchayat Raj)
P.S. to Minister (Municipal Admn)
P.S. to Chief Secretary to Govt of A.P.
P.S. to Spl. Chief Secretary to Government, HM&FW Dept
P.S. to Prl. Secy to HM&FW Dept.
P.s to Prl. Secy to Health & Women Development.
Finance (Expr.M&H.II) Dept.
Sf/Sc

// FORWARDED :: BY ORDER //

SECTION OFFICER

1. Primary Health Centre

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl. No. | Persons | Designation |
|----------------|---|--------------------|
| 1. | Reputed Non Government Practitioner / Philanthropist, active in the region, to be selected by the District Collector. | Chairman |
| 2. | A member having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 3. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation. | Member |
| 4. | Senior of the regular Medical Officers of the PHC or Sr. Medical Officer (if both are contract MOSs) | Member & Convener |
| 5. | President/ Secretary from Mandal Mahila Samakhya in that village | Member |
| 6. | MPDO | Member |

2. Community Health Centre

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl.No. | Persons | Designation |
|---------------|---|--------------------|
| 1. | Reputed NGP/ Philanthropist, active in the region, to be selected by the District Collector | Chairperson |
| 2. | A member having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 3. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation. | Member |
| 4. | Deputy DM&HO | Member & Convener |
| 5. | President / Secretary from Mandal Mahila Samakhya | Member |
| 6. | Municipal Commissioner | Invitee |
| 7. | MPDO | Member |

3. Area Hospital

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl.No. | Persons | Designation |
|---------------|--|--------------------|
| 1. | Reputed NGO / Philanthropist, active in the region, to be selected by the District Collector | Chairperson |
| 2. | Two members having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 3. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation. | Member |
| 4. | RDO / Sub-Collector | Co- Chairperson |
| 5. | Medical Superintendent of the Hospital | Member & Convener |
| 6. | President / Secretary from Mandal / Urban Mahila Samakhya in that town | Member |
| 7. | EE, APMSIDC | Member |
| 8. | Municipal Commissioner | Invitee |

4. District Head Quarters Hospital

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl.No. | Persons | Designation |
|---------------|---|--------------------|
| 1. | Reputed NGO / Philanthropist, active in the region, to be selected by the District Collector | Chairperson |
| 2. | A member having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 3. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation. | Member |
| 4. | District Collector | Co-Chairperson |
| 5. | Medical Superintendent of the Hospital | Member & Convener |
| 6. | DMHO | Member |
| 7. | Nursing Superintendent | Member |
| 8. | Municipal Commissioner | Member |
| 9. | Representative from APMSIDC (EE/ Manager- District drug stores) | Member |
| 10. | President / Secretary from Zilla Samakhya | Member |
| 11. | One Philanthropists or Donors | Member |

5. Government Teaching Hospitals

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl.No. | Persons | Designation |
|---------------|--|--|
| 1. | Reputed NGO / Philanthropist To be selected by the District Collector | Chairman |
| 2. | District Collector | Co-Chairman |
| 3. | Director Medical Education / Academic DME / ADME | Member & Convener |
| 4,5 | Two representatives: Established self-help groups / NGOs / Social Workers / Philanthropists / Prominent Citizens of which at least one of them shall be a women and whose accounts have been audited for a minimum period of five years and are available for scrutiny | Three members. Out of which one shall be women. |
| 6. | A member having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 7. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation. | Member |
| 8. | Municipal Commissioner concerned | Member |
| 9. | Principal of Medical College concerned | Member |
| 10. | Superintendent of Hospital | Member |
| 11. | Executive Engineer APMSIDC | Member |

- Amounts up to Rs.50,000/- can be approved by the Superintendent of the concerned hospital.
- Procurement below Rs. 50,000/- shall be utilized following the prescribed procedure without prior permission of Hospital Development society.
- Expenditure of an amount of more than Rs.50,000/- and up to 10,00,000/- have to be approved/ ratified by the HDS committee, as per the G.O.Ms.No.17 dt:04.02.2013.
- All the purchases has to be approved and procured by the purchase committee.

The purchase committee consists of :-

| S.No. | Persons | Designation |
|-------|--|-------------|
| 1. | Superintendent of the concerned hospital | Chairman |
| 2. | Principal of the concerned medical college | Member |
| 3. | Resident Medical Officer concerned hospital | Convener |
| 4. | Asst. Director / Drawing Officer concerned hospital | Member |
| 5. | Collector's nominee well versed with accounts / purchase | Member |
| 6. | Head of the Departments of concerned hospital | Member |
| 7. | Bio-Medical Engineer of the District | Member |

- Net profits of the NTR Vaidya Seva Programme shall be deposited into the Hospital Development Society account.
- Any expenditure above 10.00 lakhs approved by HDS committee should be submitted to DME to administrative sanction and procurement shall be through APMSIDC.
- All the accounts should be audited annually.

6. AYUSH Medical colleges and attached hospitals Development Society

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| Sl.No. | Persons | Designation |
|--------|---|--|
| 1. | Reputed NGO / Philanthropist To be selected by the District Collector | Chairman |
| 2. | District Collector | Co-Chairman |
| 3. | Additional Director of Medical Education | Member |
| 4,5. | Two representatives: Established self-help groups / NGOs / Social Workers / Philanthropists / Prominent Citizens of which at least one of them shall be a women and whose accounts have been audited for a minimum period of five years and are available for | Three members. Out of which one shall be women. |

| | | |
|-----|---|-------------------|
| | scrutiny | |
| 6. | Principle of the college | Member & Convener |
| 7. | Superintendent of the attached hospital | Member |
| 8. | Member, Central Council of India Medicine / Homeopathy / Yoga | Member |
| 9. | Executive Engineer APMSIDC | Member |
| 10. | Municipal Commissioner | Member |

7. AYUSH Dispensaries (Standalone / Mini Hospitals) Development Society

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| S.No. | Persons | Designation |
|--------------|---|--------------------|
| 1. | Reputed Philanthropist/NGO/NPO To be selected by the District Collector | Chairman |
| 2. | A member having a background and experience of social work, social mobilisation activities, for weaker sections etc., | Member |
| 3. | A representative with valid experience in Institutional Deliveries, Social Service, Poverty Alleviation | Member |
| 4. | Senior of the regular Medical Officers of AYUSH | Member & Convener |
| 5. | Mahila Samakhya | Member |
| 6. | MPDO | Member |

8. Constitution of Medical College Development Societies

Annexure to G.O.Ms.No.48 HM&FW (D) Dept., dt:13.05.2015

| S.No. | Persons | Designation |
|--------------|---|--------------------|
| 1. | Collector | Chairman |
| 2. | Principal of Medical Colleges | Convener |
| 3. | Superintendent of Teaching Hospital of Medical Colleges | Member |
| 4. | Three Heads of Departments, one from Each of Preclinical, Para Clinical and Clinical Departments by rotation once in two years. | Member |

**POONAM MALAKONDAIAH
PRINCIPAL SECRETARY TO GOVERNMENT**